

Permission Slip

I give permission for my child, _____ to attend the trip to New Hampshire on March 4-6 and / or Long Island March 18 - 20. I understand my child if my child is selected on the advance team, s(he) will be traveling to destination in private insured vehicles driven solely by adults. .

Should illness or accident occur during the event, I will not hold Shrewsbury Public Schools or its employees, any of our sponsors or their employees or any adult supervisor liable for any medical or additional expenses. I give my permission for any medical attention to be given if my child becomes injured or ill. I will also not hold Shrewsbury Public Schools or its employees, any of our sponsors or their employees or any adult supervisor liable for any loss of personal property. Please limit your child to not more than \$25 spending money per day, plus \$2.00 for the bus driver's tip.

All rules pertaining to behavior and attendance as outlined in the SHS Student Handbook are strictly enforced at all times. Any student violating any rules in the SHS Student Handbook will be subjected to the appropriate discipline upon his/her return to school. If necessary, disciplinary actions will also be taken while students are still on the trip including being sent home immediately. Parent will be responsible to retrieve child, should it be determined necessary. You are representing our school, town, and corporate sponsors. Make sure that the future school groups will be welcome to participate in the FIRST Program.

Date: _____

Signature of Parent or Guardian

Please print name of Parent or Guardian

Signature of Student

In the event that you cannot be reached, please give names of at least two people who could be contacted in case of an emergency.

Name _____ Home () _____

Relationship _____ Work () _____

Name _____ Home () _____

Relationship _____ Work () _____